

29 APR 2006

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/564628

FILING DATE

APPLICANT(S)

CLAIMS

(703) 505-0421

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
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TOTAL IND.	2		2			
TOTAL DEP.	18		22			
TOTAL CLAIMS	20		24			

PTO-1160 (REV. 11/04)

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

U.S. DEPARTMENT OF COMMERCE

Best Available Copy